How to File a Grievance (Complaint) about a Certified Professional Guardian

Who can file a grievance about a certified professional guardian?

Anyone can file a grievance about a certified professional guardian.

Do I need a lawyer to file a grievance?

You do not *have* to have a lawyer, but it is a good idea to have a lawyer who knows about guardianships.

How do I file a grievance with the Certified Professional Guardian Board?

Fill out the attached Grievance Form and send it to the Certified Professional Guardian Board.

What will the Certified Professional Guardian Board do with my grievance?

- 1. The disciplinary committee of the Board will review the grievance to see if the Board has the authority to act and if your complaint is clear.
- 2. If the guardianship case is active (the incapacitated person still has a guardian), the disciplinary committee will send the grievance to the local superior court where the guardianship case is located and ask the court to review and respond to the grievance.
- 3. The disciplinary committee will review the court's response and decide what action, if any, to take against the guardian. The disciplinary committee will write you about the outcome. This process usually takes several months.

Where else can I complain about a guardian?

- 1. If you do not have an attorney,
 - Write a letter about your complaint and take it to the clerk's office at the superior court where the guardianship case is located.
 - The court may appoint a guardian ad litem to investigate, have the clerk set up a court date, or deny your request.
- 2. If the incapacitated person is at risk of harm, financial exploitation, or any kind of abuse, call Adult Protective Services at 1-866-END HARM (1-866-363-4276).

Where can I learn more about the rules and regulations certified professional guardians must follow?

- All guardians must follow the regulations found in RCW 11.88 and RCW 11.92
- Certified Professional Guardians must also follow the Certified Professional Guardian Board's <u>Standards of Practice</u> (Minimum expectations about how a guardian should act)

Grievance Form

For grievances (complaints) about a Certified Professional Guardian

Fill out items 1 - 6, and mail this form to:

Administrative Office of the Courts
Attn: Certified Professional Guardian Board
1206 Quince St SE
P O Box 41170
Olympia, WA 98504-1170

Your information (person filling out this form) Name:

first name	middle initia	I	last name	
Address:				
street nu	ımber	city	state	zip
hone Number ()	Email _		
ow are you connected	I to this case?			
ncapacitated person's	s information (p	erson who	has a guardi	an)
lame:				
first name	middle initia	I	last name	
lame of county in which	h guardianship is	filed:		
uardianship case num				
Guardian's Informatio	•	ne upper rigi	ht corner of co	ourt papers)
ame:				
first nam	ne midd	le initial	lasi	t name
ame of guardian agen	cy (if any)			
ertified Professional G				

Reasons for this grievance 4.

Explain what the guardian did or did not do, what he or she said, or any other actions of the guardian that you are concerned about. Here are some tips:

• Be specific! Include dates, times, and places. • If you need more paper, attach a page with the rest of your explanation. • Attach copies of any related documents, like court orders, receipts, or letters.

Histo	ory								
a . Is	there st	ill a gua	ardiansh	ip?					
	□ No		Yes						
	ave you ⊐ No	discus	sed you Yes	r concern	s with th	e guard	ian?		
	as the co	ourt cor	nsidered	the matt Yes	ers you a	are cond	erned al	oout?	
If	yes, wh	at happ	ened? _						
				any othe complair			ame)		
.,	مانيد مميد	ot bonn	on od?						

6. Agreement

By signing this form, I understand that:

- This grievance is a public record. That means that other people may be able to see my grievance and any documents that are a part of the grievance.
- This grievance will be sent to the certified professional guardian, the Certified Professional Guardian Board, and the superior court.
- I understand that the Administrative Office of the Courts and other people may share information related to my grievance and the investigation.

I affirm that the information on this form is true and correct to the best of my knowledge.

Sign here:	Date:
Signed at (city and state)	